

DEC 16 2004

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (if original) 057909-041004
CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(e)] I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 703-872-2386 on December 16, 2004. Signature: <u>[Signature]</u> Name: <u>Shoshone Abdulhakeem</u>		In re Application of Peter E. Prevelige, Jr. Application Number 09/800,240 Filed March 6, 2001 For: Method Of Monitoring HIV Assembly And Maturation Group Art Unit 1648 Examiner: Jeffrey S. Parkin
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate entity fee are as follows (check time period desired): <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$1210) <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) <u>450.00</u> <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1560) <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> . I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____ <u>[Signature]</u> <u>December 16, 2004</u> Signature Date <u>Scott J. Hawranek (Reg. No. 52,411)</u> <u>202-585-8000</u> Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assigners of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. <input type="checkbox"/> Total of _____ forms are submitted.		

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PAGE 4/14 * RCVD AT 12/16/2004 3:46:36 PM [Eastern Standard Time] * SVR:USPTO-EFAXF-1/2 * DNS:8729306 * CSID:8667410075 * DURATION (mm-ss):04:32

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